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APPLICANTS

Hirokazu Sakai, Tokyo, JAPAN;

 Hiroto Tanamachi, Tokyo, JAPAN;
 Yoshimasa Okamoto, Tokyo, JAPAN;
** CONTINUING DATA ***** *None**Kip*** FOREIGN APPLICATIONS ***** *yes*

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Kip</i> Initials				

ADDRESS

 22850
 OBLON, SPIVAK, MCCLELLAND, MAIER & NEUSTADT, P.C.
 1940 DUKE STREET
 ALEXANDRIA, VA
 22314

TITLE

Hair cleansing composition

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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